Sullivan County NH

Type of meeting:

Board of Commissioners Public Business Meeting

Date/Time:

Thursday, August 20, 2009; 3 PM

Place: Unity County Complex, 5 Nursing Home Drive, Sullivan County Health Care Facility, Frank Smith Living Room

Attendees: Commissioners Jeffrey Barrette - Chair, Bennie Nelson - Vice Chair

and Ethel Jarvis - Clerk; Greg Chanis - County Administrator; County High Sheriff Michael Prozzo, Ted Purdy - S.C.H.C. Administrator,

Sharon Johnson-Callum (minute taker)

Special guests: Nick Manolis - NH Primex Executive Consultant; Margaret

Bemis - Charlestown Senior Center Director; and Jessica

Rosman - Public Health Network Coordinator.

Public attendees: Archie Mountain - Claremont Villager; Suzanne Gottling -

State-County Delegate/EFC Chair.

3:15PM The Chair, Commissioner Jeffrey Barrette, brought the meeting to

order and led all in the Pledge of Allegiance.

Sullivan County Health Care Panel Agenda Item No. 1

An August 11, 2009 bound report was distributed [Appendix A 1-14] to the Board of Commissioners and Sullivan County Health Care Advisory Panel members present.

Nick Manolis noted Sullivan County is becoming a model for what they are hearing; other municipalities are looking at in future planning - what their direction of operation is - "hats off to Sullivan County"; he thanked Ms. Johnson-Callum for supporting work of panel and he listed those on the panel, who included:

- o Margaret Bemis, Charlestown Senior Center Director
- o Brandy Blackinton, Greater Claremont Chamber of Commerce
- o Clare Bowen, Valley Regional Hospital Executive Director
- o Ella Casey, Newport Chamber of Commerce Director
- o Tom Donovan, State-County Delegate
- o Andrew Fennelly, Claremont Housing Authority Executive Director
- o Ethel Jarvis, Sullivan County Commissioner
- Carla Skinder, Connecticut valley Home Care/State-County Delegate
- o Bettie Stark, Claremont Senior Center Director
- o Tanya Wilkie, Sugar River Valley Regional Technical Center Educator
- o Reverend Pat Williams, Sunapee Community United Methodist Church.

The advisory panel's task was to provide guidance on two issues:

- 1) how to enhance public relations in health care facility
- 2) looking to the future, what can health care be in the county today

The panel was not charged to look at operations; they met three times for 2-3 hours each; Ted Purdy - SCHC Administrator provided the panel with advice and insight. Manolis highlighted on various points throughout the report.

Commissioner Jarvis noted she read the report carefully and thought the question poignant, from Andrew Fennelly, who asked, "If you owned the facility what would you do?" Mr. Purdy thanked Manolis and commended him for keeping the members engaged throughout each meeting. Barrette noted, the ideas were good, thanked everyone for their work on the project and indicated the Board needs to decide which ideas to focus on and determine which way to go. Nelson thanked everyone and noted, "This gives us a different view."

Manolis asked permission from the Board to share the report with sister facilities. The Board agreed.

Commissioner Barrette presented Margaret Bemis with a *Certificate of Recognition* for participating as a member on the panel. Commissioner Jarvis asked Ms. Bemis if attending on the panel changed her point of view of the County? Ms. Bemis noted she learned a lot, and indicated it was "too bad" some still have the perception they do of the facility.

Agenda Item No. 2 Sheriff's Office: Proposal From Town of Lempster Reference Police Vehicle

Sheriff Prozzo noted he had an opportunity to acquire the Town of Lempster's 2006 Ford Explorer, which had been used for police enforcement and no longer need by the town, as the Sheriff's Office provides contract police services.

The vehicle:

- o is already police equipped with radio and roll bars the most expensive equipment on the vehicles
- o is in excellent condition and has 19,000 miles
- o retails for approximately \$18,000+ and has a sale price \$15,000

The benefit to this transaction:

- o reduce mileage on current vehicles
- o allows for one of his deputies to respond to a Unity call if in Lempster
- o allows their office to become eligible for more highway safety grants based on number of vehicles in fleet

The County would not have to buy the vehicle, value would be deducted from the invoices Sheriff presents to Lempster for the contracted police services; this would reduce Sheriff's Office Outside Detail revenue line, which produced a surplus last year and is anticipated to produce a surplus in 2010; the vehicle would be used by the entire Sheriff's Office. Sheriff confirmed, while deputies are working in Lempster or Unity, they also perform civil service tasks within those communities; he feels the proposal benefits outweigh the negatives and wanted to take advantage of the opportunity. Sheriff confirmed their office is the predominant law enforcement agency, highest in the state, they perform parole work, drug investigations, civil services, transportations, enforcement in courts; he reminded the Board, when Superior Court reduced handling cases in twelve months to handling them in 6 months, it reduced the hours for his bailiffs, and contracting with towns needing the police coverage has allowed him to keep his deputies involved and supplement the lost revenues; he confirmed it was not mandated he contract to these towns, but it has allowed the County the opportunity to attain additional grants, such as the radar, spike strips, computers in the vehicles; with a new vehicle, they'd have an opportunity to replace an older computer through a grant, also. Sheriff confirmed he

began taking delivery of the current fleet of vehicles in October 2008; the vehicles they turned in were five years old with 122,000-125,000 miles on them. Commissioner Barrette noted he could see no benefit to acquiring the vehicle. Commissioner Nelson is in favor of the proposal as he feels it benefits both the County and Lempster, plus, he likes the idea of the Sheriff's Office having a 4-wheel drive in his fleet. The Sheriff again discussed the value of the vehicle, the cost to acquire the vehicle from Lempster, net gain in revenue of \$1,800, which brings the vehicle to \$13,200-\$13,600, currently he charges \$3,900 to Lempster for police enforcement, and with this proposal would charge approximately \$1,133 less per month; he has not billed for July 2009 as of yet; \$27,000 revenue in budget will not change, "it's the budget neutral". Commissioner Jarvis feels the 4-wheel type vehicles have a very low resale value. Sheriff noted, if the contract does not work out, the town would have the opportunity to purchase the vehicle back; there is no specific deadline to make a decision. Per request of the Board, the Sheriff will place the proposal in writing. The Chair noted they'd table discussions to 9/3/09 meeting.

Agenda Item No 3. Sullivan County Health Care Administrator's Report

Agenda Item No. 3.a.&b. Census & Revenues

Mr. Purdy distributed and discussed the following reports [Appendix B.1-7]:

- July 2009 Medicare, Private, Medicaid, HCBC (Respite), Managed Care, Medicare B Revenue: last year July census average was 129.5, this year its 132.9, 140 budgeted
- > Revenue Review thru 07/31/2009 this does not include the meal charge
- > Sullivan County Nursing Home Quarterly Resident Census
- > Medicare Length of Stay analysis had 11 admissions and 15 discharges
- Summary Admission/Discharge List
- Summary Admission/Discharge List
- > Month end Aged Analysis

Agenda Item No. 3.c. Staffing

There were no hires in July. To date in August, they hired two RN's and 3 LNA's.

Agenda Item No. 3.d. NH State Survey and Plan of Corrections

Mr. Purdy distributed copies [Appendix C] and discussed the NH State survey results and plan of corrections; Code "D" on comments indicate minimal scope/no harm would be associated to resident safety; the facility held a "mock" survey with staff in spring through a contracted agency; this year they used the resources and time to develop current operations and did not feel the drill was needed - ultimately it reflected it was okay; received two tags on life safety issues - survey very detailed and posted things he had not seen in many years such as temperature level on sprinklers in one closet and one had liquid in the system that was ineffective, a few electrical outlets failed a tension test and a couple plastic receptacles were broken those outlets and receptacles were replaced; the County received letters to indicate the facility is back in compliance; the Federal government CMS also performed a follow up survey on the NH State surveyors report - they perform follow ups to 10% of the surveys at random - and the feds found no issues. Commissioner Jarvis and Barrette commended Administration and staff for a good job. Barrette asked if the facility would be able to hold LNA programs due to the positive survey results? Purdy confirmed he'd be pressing the question this fall; he has informally passed on

his appreciation to all at the facility. Per request from Commissioner Nelson, Chanis will make sure they attach a note of appreciation to the next payroll checks.

Agenda Item No. 4. County Administrator's Report

Agenda Item No. 4.a. GSCPHN New PHER & ASPR Grants Update Mr. Chanis reintroduced Jessica Rosman, Public Health Network (PHN) Coordinator. A copy of the 8/7/09 memo from Neil Twitchell and one page budget summary were distributed [Appendix D]. Ms. Rosman noted two new grant opportunities became available for the Greater Sullivan County (GSC) PHN through the Division of Public Health Services, in coordination with Homeland Security and Emergency Management: 1) Public Health Emergency Response (PHER) \$30,000 and 2) Assistant Secretary for Preparedness and Response (ASPR) of \$12,495, to support H1N1 planning activities in the region – a federal effort to vaccinate for the virus; Neil Twitchell [Community Public Health Development Section] spoke at their GSCPHN meeting, this morning, about the funding opportunities and the federal vaccination efforts; the Federal CDC identified the those to be vaccinated for H1N1 are: 6 mos. - 18, pregnant women and health care providers; so far, one mild H1N1 strain has been noticed in NH and they anticipate mutation of virus-as it does it could become more severe; PHN's will prepare to open Acute Care Centers (ACC's) in case hospitals are too full; they will be restocking the All Health Hazard Region (AHHR) trailers. Phase II they will hire another person to continue the vaccination campaign; Phase III funding would arrive if a state wide emergency is declared - this portion would be received upon receipt of emergency expenditures; vaccination distribution points: occupational health facilities will receive doses for workers, PHN clinics activating AHHR plan - opening PODS (Point of Dispensing) offering specific times/places-will hold one practice with that and Colby Sawyer College will host a vaccination as part of college services, inviting towns people; they'll hold extra flu clinics, which the PHN will coordinate vs. visiting nurses association; grant funds will pay for equipment, supplies, advertising – wash your hands, stay home if you are sick and be careful; vaccines should arrive within the state by 9/9/09, NH has a small stock pile, so they've request additional, which Twitchell feels they will receive - they are now just waiting for the okay from NH Dept. of Health & Human Services to hold the clinics; a table top exercise will be coordinated with Dartmouth Hitchcock -this will determine staffing levels. Mr. Chanis noted, the grants will include indirect revenues - he reminded the Commissioners they had to eliminate indirect revenues with the PHN FY10 due to the States reduction in grant funding.

Agenda Item No. 4.b. Community Corrections Center (CCC) Update Mr. Chanis distributed copies documents titled [Appendix E]:

- o "DOC Jail Upgrade/Community Corrections Center Budget Update 8/20/09"
- Account Purchase Order History Report, dated 8/20/2009 (4 pages), reflecting FY09 & FY10 expenditures on the project

He confirmed, the Pine Hill portion went out for bid. Phase I – insulation removed, most of poly spray in place, \$100,000 contingency in North Branch and we have not eaten into contingency in last 2 weeks. Phase II – commissioners approved CCC design footprint, construction documents were released yesterday to potential bidders, 9/10 bids are due, anticipate construction documents finalized by end of September.

Agenda Item No. 4.c. Barn Lease Update

Mr. Chanis reminded the Board of previous discussion. He noted Unity Planning Board Chair, Susan Lawrence, was contacted and she provided an opinion the barn and surrounding land was agricultural use, but had deferred this to their Planning Board attorney who had gotten back to her as of today. He noted, if the Board is unable to make a decision, as the owners need shelter for their horses and hay before winter, at this point, they would not pursue this further. He recommended, if paying \$600 a year in taxes, demolition the building. Commissioner Barrette is for soliciting bids for barn use from the public. Mr. Chanis noted the County Attorney reminded him the Board could waive the bidding process. Barrette noted he did not follow Jarvis's train of thought, feels it's wasteful not to take advantage of the opportunity to lease the bard. Commissioner Nelson concurred with Barrette and suggested the County just get into the habit of bidding these types of things. Commissioner Jarvis wanted to know exactly how much land was to be taken out for use with the barn, because that portion would have nothing to do with the current use of the land, and pointed out it's not County, but private use they'd be entering in; she's sees not difference in this arrangement vs. the proposal they had review previously with sportsman club and county for the firing range. Commissioner Nelson debated this, feeling the firing range project was a "change of use", where as this is already in agricultural use and would continue. The Chair requested they make a motion, or discontinue discussions.

Motion: we punt, we do draft [lease], we move forward and do bid document for leasing whatever [amount of acreage], .2 acres, provided public access is guaranteed to the rest of parcel, and punt it to delegation. Made by: Nelson. Seconded by: Barrette.

Discussion: Commissioner Barrette and Nelson requested a proposal go out for leasing the barn and associated acres. Mr. Chanis – would recommend no further action be taken, noting for the time it will take the folks expressing an interest would not place a bid; he feels there's no point in spending money on advertising.

Motion withdrawn by Commissioner Nelson.

Commissioner Jarvis noted they need to "think of policies and procedures and not shoot from the hip, as it creates tensions". Commissioner Nelson requested Chanis to attain cost to demolition the barn

Agenda Item No. 4.d. Transfer of funds Form: \$2,619 Litigation 10.400.15050 Mr. Chanis distributed a copy of a Request For Transfer of Funds form [Appendix F], illustrating a transfer from NHAC Conference Prep line 10.400.15050 of \$2,620 to the Commissioners Office Legal Services line of 10.400.12020, in order to cover for a NHAC litigation issue - an appeal by NHAC in response to NH Retirement rates increasing in June. Mr. Chanis noted the conference budget was \$7,500, therefore that leaves \$4,880; NHAC is funding most of the conference preparation. Ms. Johnson-Callum noted she recently charged two attending Sunday as the host County to that line, in order to help prepare the conference bags - Mr. Chanis indicated this was fine

4:45 Motion: to authorize the transfer [Appendix F] as discussed.

Made by: Jarvis. Seconded by: Nelson

Voice vote: All in favor.

Agenda Item No. 4.e. NHAC Executive Council Meeting

Mr. Chanis distributed a copy of an Edwards Angell Palmer & Dodge Newsstand report on Recovery Zone Economic Development Bonds and Recovery Zone Facility Bonds [Appendix G] and noted there were bonding opportunities as part of ARRA bill. Recovery zone facility bond: ability to finance these amounts under these programs are allocated directly to counties, Sullivan has ability to allocate 5 million of financing under this bill, which would be available to private business located in the designated recovery zone, some type of project that requires capital, it's not giving them the money, but giving them money at a preferred rate, it's a rebate on interest you pay, you get it directly from the government, this would be administered through NH business finance authority who would work with the counties. The County's role is to agree to allocate the funds, if county does not believe allocation necessary they can relinguish it elsewhere. Mr. Chanis distributed Page 55 of the Department of the Treasury Internal Revenue Recovery Zone Economic Development Bond allocation Sullivan County is eligible for, which is \$3,329,000 and the Recovery Zone Facility Bond, which is \$4,994,000. The Recovery Zone Economic Development bond can be used for public infrastructure projects, such as the Community Corrections Center project. These bonds are tax-exempt. The Recovery Zone Facility Bonds are "Build American Bonds" -public infrastructure - no limit, it's incentive for rebate on your financing. The State Treasurer recommended the County use a finance advisor and provided Mr. Chanis with a recommendation; he contacted the person, spoke, briefly with them, and the person feels there is a way to finance the CCC it through the Economic Development bond. For either program, the State Treasurer suggested the Commissioners adopt the Recovery zones today; the County is currently expending money on the project and will not be able to recover that portion.

Mr. Chanis distributed the *New Hampshire Economic Revitalization Zone Program Designated Recovery Zones* map prepared by North Country Council Inc., dated July 29, 2009 [Appendix H], and a four page document from the New Hampshire Business Finance Authority [Appendix I]. The map and document identified the following areas in Sullivan County, eligible: all of Newport, Langdon, Unity, Charlestown, Acworth, and parts of Claremont.

4:49 Motion: Designate as recovery zones the portion of Sullivan County identified by the NA BFA in the document titled NHBFA Designated Recovery Zones and indicated on the accompanying map.

Made by: Nelson. Seconded by: Jarvis.

Voice vote All in favor.

Mr. Chanis noted he would return to the Board with further updates; those outside the shaded are not eligible for funds; and they will need to talk more about the program.

Agenda Item No. 5. Commissioners Report

<u>Commissioner Barrette</u> noted he did not have the <u>Commissioners Report</u> ready for the County's FY09 Annual Report, and was unprepared to do the County Administrator's evaluation. They tabled this to their 9/3/09 meeting.

Commissioner Nelson questioned:

♦ The hours of 22.5 for the SCHC dietician he noticed on a recent purchase order. He noted he would send Mr. Purdy a message.

If the County should deduct the amount of the Eagle Times subscription they lost out on when the Eagle Times closed, from any invoice received for advertising. This suggestion was unsupported by the other two Commissioners and County Administrator.

Agenda Item No. 6. Public Participate

There was no public in attendance.

Non Agenda Item Upcoming Select Board meeting status?

Ms. Johnson-Callum confirmed she would check the calendar for any upcoming town select board meetings the Board was scheduled to attend and send a reminder to the Board.

Non Agenda Item Unity County Complex Family Fun Day Update
Ms. Johnson-Callum confirmed Mr. Purdy and Ms. Shepherd indicated the event went well.

Agenda Item No. 7.d. Aug 6, 2009 Public Minutes

4:47 Motion: to accept the Aug 6 public meeting minutes as written.

Made by: Jarvis. Seconded by: Nelson.

Voice vote: all in favor.

Agenda Item No. 7.b. Aug 6, 2009 5:27 PM Executive Session Minutes

4:59 Motion: to accept and seal permanently the 8/26/09 5:27 Executive

Session minutes.

Made by: Jarvis. Seconded by: Nelson.

Voice vote: All in favor.

Agenda Item No. 7.c. Aug 6, 2009 5:38 PM Executive Session Minutes

5:00 Motion: to accept and release the 8/26/09 5:38 Executive Session

minutes.

Made by: Jarvis. Seconded by: Nelson.

Voice vote: All in favor.

Agenda Item No. 7.d. Aug 6, 2009 5:43 PM Executive Session Minutes

5:01 Motion: to accept and seal the 8/6/09 5:43 p.m. Executive Session

minutes.

Made by: Nelson. Seconded by: Jarvis.

Voice vote: All in favor.

Agenda Item No. 8. Adjourn Meeting

5:01 Motion: adjourn meeting.

Made by: Jarvis. Seconded by: Nelson.

Voice vote: All in favor.

Respectfully submitted,

Ethel Jarvis, Clerk

Board of Commissioners

EJ/s.j.c.

Date signed: 9-05



Sullivan County NH, Board of Commissioners Business Meeting Agenda - 2nd Revision

Thu. August 20, 2009

<u>Place</u>: Unity County Complex – Sullivan County Health Care Facility 5 Nursing Home Drive, Unity 03743

3:00 PM - 3:30) PM	1.	Sullivan County Health Care Advisory Panel Review Presentation, Nick Manolis NH Primex
3:30 PM - 3:40) PM	2.	Sheriff's Office: Proposal From Town of Lempster Reference Police Vehicle
3:40 PM - 4:00	PM	3.	Sullivan County Health Care Administrator's Report a. Census b. Accounts Receivable c. Staffing d. NH State Survey and Plan of Corrections
4:00 PM - 4:20	PM	4.	County Administrator's Report a. GSCPHN New PHER & ASPR Grants Update b. Community Corrections Center Update c. Barn Lease Update d. Transfer of Funds Form: \$2,619 Litigation 10.400.15050 e. NHAC Executive Council Meeting Update
4:20 PM - 4:40) PM	5.	Commissioners' Report a. Commissioners Report for the Full Annual Report b. Other updates c. County Administrator Evaluation – Per RSA 91- A:3.II.a&c.
4:40 PM - 4:55	5 PM	6.	Public Participation



4:55 PM - 5:00 PM 7. Meeting Minutes Review

a. Aug 6, 2009 Public Meeting Minutes

b. Aug 6, 2009 5:27 Executive Session Minutes

c. Aug 6, 2009 5:38 Executive Session Minutes

d. Aug 6, 2009 5:43 Executive Session Minutes

5:00 PM

8. Adjourn meeting

Upcoming Events / Meetings:

Meeting

> Sep. 1st Tue. State County Delegation Executive Finance Committee

o Time:

o Place: Room

Newport, 14 Main Street – 1st Floor Commissioners Conference

> Sep. 3rd Thu. Next Board of Commissioners Meeting

o Time:

o <u>Place</u>: Room

Newport, 14 Main Street – 1st Floor Commissioners Conference

The times reflected on this agenda, other than the start time, are estimates. Actual time will depend on level of interest and participation.



46 Donovan Street Concord, NH 03301 603-225-2841 www.nhprimex.org

August 11, 2009

Jeffrey Barrette, Chair Bennie Nelson, Vice Chair Ethel Jarvis, Clerk County Commissioner's Office 14 Main Street Newport, New Hampshire 03773

Dear Commissioners Barrette, Nelson and Jarvis:

The report which accompanies this correspondence summarizes the work of the Sullivan County Health Care Panel that met from April through June, 2009. The Panel was created to provide guidance to the County with regard to two specific issues: 1) enhanced public relations; and 2) looking toward the future.

Within that charge and scope, the Panel met three times and discussed several facets of these two issues. The essence of each of those meetings is captured in the report. When reading the entire report, the issues and actions identified provide the County with ample opportunity to have meaningful impact for the facility, its residents and staff and citizens throughout Sullivan County.

The efforts of the Panel should be recognized. Their time, effort and thoughtfulness have resulted in a valuable body of work. Many thanks to:

- Margaret Bemis, Charlestown Senior Center
- Brandy Blackington, Greater Claremont Chamber of Commerce
- Clare Bowen, Valley Regional Hospital
- Ella Casey, Newport Chamber of Commerce
- Tom Donovan, State Representative
- Andrew Fennelly, Claremont Housing Authority
- Ethel Jarvis, County Commissioner
- Carla Skinder, Connecticut Valley Home Care/State Representative
- Bettie Stark, Claremont Senior Center
- Tanya Wilkie, Sugar River Valley Regional Technical Center
- Reverend Pat Williams, Sunapee Community United Methodist Church

On behalf of Primex³, thank you for the opportunity to be part of this important undertaking. I look forward to meeting with you on Thursday, August 20.

Sincerely,

Mick Manolis

Executive Consultant

Health Care Advisory Panel Summary Report

April ~ June, 2009



SULLIVAN COUNTY HEALTHCARE ADVISORY PANEL/COUNCIL

Meeting Summary April 2, 2009

Introduction

The Sullivan County Healthcare Advisory Panel held its inaugural meeting on April 2, 2009. This summary is not intended to be a verbatim recreation of that meeting, but rather to capture the major points and main themes that were voiced by Panel/Council members at that meeting.

At the outset of the meeting, facilitator Nick Manolis of Primex established the following ground rules for the Panel's work:

- The Panel's charter is advise the Sullivan County Commissioners on two primary points:
 - a.) recommendations on how to improve Sullivan County Health Care's public relationsb.) recommendations on health care issues, trends and opportunities which present themselves to the County as potential areas for action
- The Panel's scope does not include operational matters, such as staffing and organization, for example.
- Though staff from the nursing home and/or County administrative offices may attend Panel meetings, their attendance is intended to:
 - a.) provide an informational resource to the Panel/Council; b.)
 - b.) listen "first hand" to the Panel's/Council's discussions.
- The Panel's work would focus on the following:
 - a.) current assessment
 - b.) crystal balling the future
 - c.) action(s) to improve public relations and to meet issues/trends/opportunities
 - d.) prioritization of those opportunities
 - e.) creation/submission of report to the County Commissioners

Discussion Summary

The meeting's discussion centered on improving public relations and touched on the following points:

- a.) Current assessment of the facility's public relations
- b.) The "story" the facility wants to tell
- c.) Consistent themes of that story
- d.) Broad actions to improve public relations

Current Public Relations Assessment

- Still known as the Nursing Home
- Varies from year to year based on what's going on internally
- Perception of "poor" (maybe changing based on economy)
- Driven by measurement (press; state survey and lack of understanding)
- Memories die hard
- The proximity of the jail
- In need of re-furbishing (dull and drab; uncomfortable)
- Level of care is very good
- Only good comments over last 6-8 months
- It's out of sight and out of mind
- It doesn't open itself to the community
- No real commitment to foster link w/ volunteers and community
- Lack of communication with the community at large
- Increased visibility by Ted has helped
- Lack of consistency in internal public relations function

The Story

- A place where the caring never ends.
- Care for Mom the way I would
- The County Nursing Home.... your future home
- A community care home that cares for and enriches lives
- A community choice with quality and home life care for those you love
- A beautiful country setting with quality care

Consistent Themes

- Quality Care
- Home
- Community

Broad Action

- Enhanced media relations
- Personalize the story
- More Open houses
- More openness to the community
- Enhanced community involvement (volunteers)
- The totality of service
- Attract newer demographic (define target audience and market to them)
- Build relationships with allied organizations
- Engage community health care providers to portray the "wisdom of choice"
- Elected become champions
- Portray choice/affordability

Next Meeting: The Panel/Council will meet next on Monday, May 11 from 1:00 p.m. to 4:00 p.m. at the Ahern Building, Unity.

The_agenda_for the meeting includes:

- a.) Specific actions to improve public relations.
- b.) Crystal balling the future

SULLIVAN COUNTY HEALTHCARE ADVISORY PANEL

Meeting Summary May 11, 2009

Introduction

The second meeting of the Sullivan County Healthcare Advisory Panel was held on May 11, 2009.

This meeting expanded on the foundation established by the Panel at its initial meeting on April 2, 2009. That meeting resulted in the Panel's assessment of Sullivan County Healthcare's current public relations and broad actions to enhance the same.

Meeting Agenda

The meeting was structured around two agenda items for discussion:

- 1.) Identify specific actions to enhance public relations efforts.
- 2.) Crystal balling the future (with an eye toward the issues, trends and opportunities which may present themselves to the County).

Discussion Summary

The following is intended as a summary of the meeting's discussions and not a verbatim recreation.

1.) Specific actions to enhance public relations.

Expand/maximize media relations

Print media sources include:

- The Eagle
- Valley News
- Union Leader
- Concord Monitor
- Chit Chat (the in-house newsletter)
- Kearsarge Magazine
- State Council on Aging Magazine
- Soonapee Magazine

Radio and television sources include:

- WNTK
- WCLN (utilizing the "Chamber News" segment)
- CCTV
- NCTV
- Revite

Purpose of the "message/story"

Focus on the positive throughout

Target audience

- Current residents
- · Families of current residents
- Prospective residents and their families
- Caregivers of prospective residents
- Agencies/organizations based on distinctive competencies

The top three "headlines" focusing on distinctive competencies include:

- The best Alzheimer's unit, respite care, post acute rehabilitation services.
- High quality care, attractive location, history of providing quality service to the community.
- Effective collaboration with other resources.

More community visibility and connection

- Open houses
- Involvement in local civic groups
- Utilize National Nursing Home Week as a press release opportunity
- Presence at events hosted by (potential) collaborators
- Sponsor LNA certification course
- Celebrate employee contributions

The role of the elected official as a "champion" for Sullivan County Healthcare

- Focus on the quality service that the facility provides and not personal issues
- Recognize that the facility is not only "about the money"
- Staff needs to orient and educate elected officials with the facts
- Elected officials should know the facility's "story" and be able to re-tell it with conviction and enthusiasm

Conduct focus groups

Pay particular attention to involvement, input and a customer view.

Portray choice and affordability as major "selling points"

- Existing analysis says the facility is competitive in the marketplace
- Make certain that the facility can portray itself as a place where residents/families get "good value"
- Make value part of the story
- Position the strength of the story versus the "aesthetic" of the facility
- Think about marketing outside if the County

2.) Crystal balling the future

- Use next survey to provide positive public relations opportunities
- Offer facility as a meeting place for meetings of "outside" groups/organizations
- Construct swimming pool for rehabilitation purposes
- Develop the potential as a referral source for a younger market
- · Air condition the entire facility
- Become a permanent placement resource for younger residents
- Become a resource for returning members of the military
- Become an ambulatory resource for those with chronic illnesses
- Become a key player in the coordinated care for the elderly
- Consider enhancing the availability to "tour the facility"
- Meet respite needs
- Recognize the opportunities and challenges that the "gray tsunami" bring

An overarching element of the day's discussion centered on who would have the responsibility for taking the Panel's work and moving it forward. Consensus identified the Nursing Home Administrator as the person responsible for the creation and execution of a plan to bring the key elements of the Panel's contributions to life. The possibility of engaging outside resources to assist was mentioned.

Next Meeting: The Panel will hold its third and final meeting on Monday, June 15 from 1:00 p.m. to 4:00 p.m. at the Ahern Building.

The agenda for that meeting will be:

- 1.) Identification of specific actions to augment the "crystal ball thoughts"
- 2.) Reaction to this question: "If you owned this facility, what would you do to make it more successful?" (Panel members are asked to give this question some thought prior to the meeting.)
- 3.) Prioritization of actions to support customer relations and crystal ball opportunities.

SULLIVAN COUNTY HEALTHCARE ADVISORY PANEL

Meeting Summary June 15, 2009

Introduction

The third and final meeting of the Sullivan County Healthcare Advisory Panel was held on June 15, 2009.

This meeting expanded on the foundation established by the Panel at its initial meeting on April 2, 2009 and the discussions of the Panel's May 11, 2009 meeting.

Meeting Agenda

The meeting was structured around two agenda items for discussion:

- 1.) Specific actions to augment the "crystal ball" opportunities identified by the Panel during the May 11 meeting.
- 2.) Prioritization of actions to support both the customer relations and crystal ball opportunities identified in the Panel's two prior meetings.
- 3.) Reaction to this question...."If you owned this facility what would you do to make it more successful?"

Discussion Summary

The following is intended as a summary of the meeting's discussions and not a verbatim recreation.

1.) Specific actions to augment "crystal ball" opportunities

The Panel identified the following actions to support the twelve potential opportunities it identified during the May 11 meeting:

- 1) Utilize Survey Results to Provide Positive Public Relations Opportunities
 - a. Dependent on nature of results
 - b. Prepare with "mock" survey; focus, think about peer review
 - c. Pre-empt with direct action if results are not positive
 - d. If positive, get word out
 - e. Tie into staff recognition
 - f. Recognize efforts of referral sources

2) Offering Facility as a Meeting Place for Outside Organizations/Groups

- a. Make availability known
- b. This ties to more community visibility
- c. Is there a niche for school students? (marketing and recruitment)

3) Construct Swimming Pool for Rehabilitation Purposes

- a. Needed resource, particularly for younger residents
- b. Use the lack of facilities close-by as the catalyst for "first class" perception
- c. Use for public use when not being used by residents

4) Develop the Potential as a Referral Source for a Younger Market

- a. Identify the target market (create the market contacts).
- b. Identify the niche product/service that will serve market
- c. Utilize Visiting Nurses Associations as contact point

5) Air Condition the Entire Facility

- a. Question re: What fate will be in the budget process
- b. Make the case based on quality of care, comfort, cost

6) Become a Permanent Placement Resource for Younger Residents

a. Remember ability to pay

7) Become a Resource for Returning Members of the Military

- a. Identify the potential market
- b. Think about mental health as the key service here
- c. Build bridge by hosting support groups
- d. How will you show your service is better; where is the void?

8) Become an Ambulatory Resource for Those with Chronic Illnesses

- a. Get the word out
- b. Again, relationship with referral sources is key

9) Become a Key in Coordinated Care for the Elderly

- a. Access and become part of state-wide groups
- b. Find partners and collaborators

10) Consider Enhancing Availability of Facility Tours

- a. Let staff know about open availability
- b. Use as a training/development source (become a long-term clinical site)
- c. Community connection

11) Meet Respite Needs

- a. Get the word out re: service
- b. Bed availability could be problematic
- c. Consider blending with Hospice

12) Recognize the Opportunities and Challenges the "Gray Tsunami" Brings

- a. Be prepared to deliver geriatric services with qualified staff
- b. Anticipate the need for private rooms
- 2.) Prioritization of actions to support both the customer relations and "crystal ball" opportunities identified in the Panel's two prior meetings

Customer Relations Opportunities (as broadly identified by the Panel at its April 2 meeting)

- 1) Enhanced Media Relations
- 2) Create Message/Story
- 3) Define Target Audience
- 4) Create the "Headlines" re: Distinctive Competencies
- 5) Enhanced Community Visibility/Connection
- 6) Elected Officials as Champions for the Facility
- 7) Conduct Focus Groups (both within the facility and the community)
- 8) Portray "Choice and Affordability" as Major Selling Points

Crystal Ball Opportunities (as identified by the Panel at its May 11 meeting)

The list below reflects the rank order prioritization as established by the Panel. The repeat of ranking indicates a "tie".

- 1) Recognize the Opportunities and Challenges that the "Gray Tsunami" Brings
- 1) Utilize Survey Results to Provide Positive Public Relations Opportunities
- 1) Become a Key in Coordinated Care for the Elderly
- 2) Develop the Potential as a Referral Source for the Younger Market
- 3) Air Condition Entire Facility
- 3) Offer Facility as a Meeting Place for Outside Organizations/Groups
- 3) Construct Swimming Pool for Rehabilitation Purposes

- 3) Meet Respite Needs
- 4) Become an Ambulatory Resource for Those with Chronic Illnesses
- 4) Become a Permanent Placement Resource for Younger Residents
- 4) Become a Resource for Returning Members of the Military
- 4) Consider Enhancing the Availability of Facility Tours

3.) If you owned this facility what would you do to make it more successful?

- Make it an integral part of the community.
 Work to get a new union for employees.
 Bring back unit aids.
 Establish a resident/family advisory council.
 Air condition the facility.
 Revamp the Human Resource Department.
- Sullivan County very well run.
 More volunteers.
- Make certain that all staff understand how to care for the elderly.
 Develop a marketing plan.
 Develop a competitive edge.
- Hire a Public Relations Director.

Give the facility a face lift.

Air conditioning.

Pool.

Gardens.

Improve Food Service Department.

Develop state of the art rehabilitation session.

Develop senior housing and assisted living apartments/condos.

Dedicated respite unit.

Develop younger resident unit.

Network throughout community.

Get the facility's story out and make it alive and believable.

Bring the "outside" in to see the facility.

Appreciate staff; make it a place where they love to work which will make it a place where residents love to live.

Utilize the nursing programs to their full potential.

• Facility is on the right track for the first time in many years with people such as Ted Purdy at the helm. The nursing home will always be a political hot bed, so get to your politicians early and often.

- Separate it from the County.
 Develop distinctive competencies.
 Develop strong connection with the community.
 Create all private rooms.
 Employ geriatric MD and RN.
 Empirically demonstrate quality of care.
- Change the name.
 Take away from "county poor farm" image.
 Be in conversation with community groups.
- Offer attractive private rooms.
 Offer LNA program.
 Engage nursing programs to do long term care clinical rotation.
 Expand to include assisted living.
 Create an attractive dementia unit.
 Create distinctive competencies and sell them.

				JULY 2009			
MEDICARE							
	July 2008 COMPARE	July 2008 AVG. CENSUS	July 2009 Actual	July 2009 AVG DAILY CENSUS	BUDGETED	BUDGETED AVG CENSUS	VARIANCE
CENSUS:	348	11	203	7	341	11	-1:
REVENUE	\$158,726.36		\$108,077.61		\$158,565.00		-\$50,487.
AVERAGE RATE PER DAY	\$456.11		\$532.40		\$465.00		\$67.4
PRIVATE							
		July 2008 AVG. CENSUS	July 2009 Actual	July 2009 AVG DAILY CENSUS	BUDGETED		VARIANCE
CENCIE.	July 2008 COMPARE 785	<u>CENSUS</u> 25	586	19	620	20	VARIANCE
CENSUS: REVENUE	\$161,855.00		\$127,940.00	- 19	\$133,300.00	20	-\$5,360.0
AVERAGE RATE PER DAY	\$206.18		\$218.33		\$215.00		\$3.
AVERAGE RATE PER DAT	φ200.16 [······································	Ψ2.10.33	l	Ψ210.00	II	Ψ0.
The second secon	 					1	N
MEDICAID		1 / 2000		July 2009		<u> </u>	
		July 2008					
		AVG.	11 0000 4 -41	AVG DAILY	DUDOETED		MADIANIOE
0=110110	July 2008 COMPARE	CENSUS	July 2009 Actual	CENSUS 107	BUDGETED 3,379	109	VARIANCE -
CENSUS:	2,876	93	3,330 \$499,200.30	107	\$513,608.00		-\$14,407.
REVENUE	\$444,543.32		\$499,200.30 \$149.91		\$152.00		-φ14,407. -\$2.
AVERAGE RATE PER DAY	\$154.57		ψ149.91		Ψ102.00		ψε.
······································	1						
AV		July 2008		July 2009			
		AVG.		AVG DAILY			
	July 2008 COMPARE	CENSUS	July 2009 Actual	CENSUS	BUDGETED	1	VARIANCE
CENSUS:	4	00,,000		0		0	
REVENUE	\$641.28		\$0.00		\$424.66		-\$424.
AVERAGE RATE PER DAY	\$160.32		\$0.00		\$0.00		\$0.
MANAGED CARE	ğ					Ţ	
MANAGED CANE	· ·	July 2008		July 2009			
		AVG.		AVG DAILY			
	July 2008 COMPARE	ÇENSUS	July 2009 Actual	CENSUS	BUDGETED	1	VARIANCE
CENSUS:	July 2008 COMPARE	CENSUS 0			DODOLILL	0	VI II WAY
REVENUE	\$0.00	· · · ·	\$0.00	-		t	\$0.
AVERAGE RATE PER DAY	\$0.00		#DIV/0!	 		†	#DIV/0!
AVERAGE RATE FER DAT	φυ.υυ		1 11010101	<u> </u>		<u> </u>	
	L. COOR COMPANY		Luby 2000 Actual			·	

	July 2008 COMPARE		July 2009 Actual			
TOTAL CENSUS	4,013		4,119		 	
AVERAGE CENSUS		129.5		132.9	 140.0	

Lut. 2002 A -tuel		
July 2009 Actual BUDG	GETED VARIANCE	
\$27,252.48 \$50,294.44	\$35,061.42 \$15,233	

TOTAL MONTHLY REVENUE VARIANCE	/#EE (477\
I TOTAL MONTHLY REVENUE VARIANCE	1 (300,44/11

Revenue Review thru 07/	31/2009						
	D. d. d	31	Days				
	Budget	1 mth Budget	YTD		Varience		
Medicaid	6,047,320	513,608	49	97,489	(16,119)		
Private	1,569,500	133,300	1:	33,895	595		
Insurance	15,000	1,274		21,587	20,313		
Respite (HCBC)	5,000	425		_	(425)		
Medicaid Assessment	1,830,110					Paid quarter	rly
Medicare Part B (Total)	412,820	35,061		19,028	13,967		
Medicare Part A	1,866,975	158,565	10	08,078	(50,487)		
Proshare	500,000					Paid at end	of FY
Net Varience					(32,156)		
Misc Income	5,000	425		435	10		
Laundry	75,000	6,370		-	(6,370)		
Cafeteria	13,000	1,104		1,656	552		
Meals	371,664	31,566		-	(31,566)		
YTD Varience			8	12,168	(69,530)		
	12,711,389						

Sullivan County Nursing Home Quarterly Resident Census

	TOTAL DAYS	MEDI	CAID	PRI	VATE	SKIL	LED	Н	CBC	MAN	AGED	LE	AVE	TOTAL	DAYS
	AVAILABLE	ÐA	YS	D.A	AYS	D/	YS	RE	SPITE	CA	RE	, D,	AYS	FILLI	ED
Jul-09	4836	3330	80.84%	586	14.23%	203	4.93%	0	0.00%	0	0.00%	0	0.00%	4119	85.17%
Aug-09	4836		#DIV/0!		#DIV/0!	,	#DIV/0!		#DIV/0!	V.	#DIV/0!	0	#DIV/0!	0	0.00%
Sep-09	4680		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/01	0	0.00%
1ST QUARTER	14,352	3,330	80,84%	586	14.23%	203	4.93%	0	0.00%	0	0.00%	0	0.00%	4,119	28.70%
Oct-09	4836		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/0!	0	0.00%
Nov-09	4680		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/0!	0	0.00%
Dec-09	4836		#DIV/0!		#DIV/01		#DIV/0!	,	#DIV/0!		#DIV/0!	0	#DIV/01	0	0.00%
2ND QUARTER	14,352	0	#DIV/0)	0	#DIV/OI	0	#DIV/0!	0	#DIV/01	0	#DIV/01	, 0	#DIV/0!	.0	0.00%
Jan-10	4836		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/0!		#DIV/0!	0	#DIV/01	0	0.00%
Feb-10	4368		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/01		#DIV/0!	. 0	#DIV/0!	0	0.00%
Mar-10	4836		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/0!		#DIV/0!	0	#DIV/0!	0	0.00%
3RD QUARTER	14,040	0	#DIV/0!	0	#DIV/0!	0	#DIV/01	0	#DIV/01	0	#DIV/01	Ö	#DIV/OI	0	0.00%
Apr-10	4680		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/0!		#DIV/0!	0	#DIV/0!	0	0.00%
May-10	4836		#DIV/0!		#DIV/0!		#DIV/0!	0	#D!V/0!		#DIV/0!	0	#DIV/0!	0	0.00%
Jun-10	4680		#DIV/0!		#DIV/0!		#DIV/0!	0	#DIV/01		#DIV/0!	O,	#DIV/0!	0	0.00%
4TH QUARTER	14,196	0	#DIV/01	0	#DIV/OL	0	#DIV/0!	0	#DIV/01	0	#DIV/0!	0	#DIV/01	0	0.00%
FY '10 TOTAL	56,940	3,330	80.84%	586	14.23%	203	4,93%	0	0.00%	0	0.00%	0	0.00%	4,119	7.23%
												14 12			
YTD AVG.		107.4		18.9		6.5								132,9	

RESIDENT CENSUS - FY 09

	TOTAL DAYS	MEDI	CAID	PRI	VATE	SKIL	_ED	Н	CBC	MAN	AGED	LE	AVE	TOTAL	DAYS
	AVAILABLE	D∆	XYS	D/	4YS	DA	YS	RE	SPITE	CA	RE	D	AYS	FILLI	ED
1ST QUARTER	14,352	8,970	74.56%	2,047	17.01%	953	7.92%	17	0.14%	44	0.37%	0	0.00%	12,031	83.83%
2ND QUARTER	14,352	9,447	76.78%	1,973	16.04%	801	6.51%	3	0.02%	80	0.65%	0	0.00%	12,304	85.73%
3RD QUARTER	14,040	9,448	75.11%	2,164	17.20%	916	7.28%	0	0.00%	51	0.41%	0	0.05%	12,579	89.59%
4TH QUARTER	14,196	9,826	75.66%	1,890	14.55%	1263	9.73%	Ö	0.00%	8	0.25%	0	0.00%	12,987	91.48%
					,		ì								
FY '09 TOTAL	56,940	37,691	75.53%	8,074	16.18%	3933	7.88%	20	0.04%	183	0.37%	0	0.01%	49,901	87.64%
AVGERAGE	1	103.3		22.1		10.8								136.7	

Medicare Length of Stay Analysis

Sullivan County Health Care (SC)

Page 1 of 1 8/14/2009 10:18 AM AR7400A

	Jul 2009	Jun 2009	May 2009	Apr 2009	Mar 2009	Feb 2009	Jan 2009	Dec 2008	Nov 2008	Oct 2008	Sep 2008	Aug 2008	12 Mos.	Calendar Y
Total Admits & Readmits (All payer types)	11	8	7	18	17	17 .	16	13	11	14	12	14	158	94
MCR # Admits & Readmits	5	5	6	16	12	5	10	6	7	8	8	7	95	59
MCR # Discharges from facility MCR Discharged LOS	3 59.0	7 49.1	6 39.8	3 19.0	4 25.8	1 14.0	4 35.0	2 25.0	2 53.5	3 15.3	6 30.5	3 12.3	44 34.0	28 38.4
MCR # End or A/R Change	6	4	5	5	8	8	3	2	6	3	5	5	60	39
MCR End or A/R Change LOS	59.8	50.3	31.6	24.0	58.9	36.9	26.0	65.5	51.2	63.7	42.2	65.0	47.3	42.7
Total Average MCR LOS	59.6	49.5	36.1	22.1	46.8	34.3	31.1	45.3	51.8	39.5	35.8	45.3	41.6	40.9
Total MCR Days	203	349	460	454	286	321	309	222	226	353	319	286	3788	2382
Rehab RUGs	190	349	449	447	283	309	263	204	207	299	269	244	3513	2290
% of Total MCR Days	94%	100%	98%	98%	99%	96%	85%	92%	92%	85%	85%	86%	93%	96%
Non-Rehab RUGs	13		11	7	3	12	46	18	19	54	46	41	270	92
% of Total MCR Days	6%		2%	2%	1%	4%	15%	8%	8%	15%	15%	14%	7%	4%
Default Days % of Total MCR Days											•			
A ADL (low dependency)		19	32	28	48	53	42	50	59	77	81	77	566	222
% of Total MCR Days		5%	7%	6%	17%	17%	14%	23%	26%	22%	26%	27%	15%	9%
B ADL (medium dependency)	125	159	186	210	103	202	214	165	104	167	150	79	1864	1199
% of Total MCR Days	62%	46%	40%	46%	36%	63%	69%	74%	46%	47%	48%	28%	49%	50%
C ADL (high dependency)	78	171	242	216	135	66	53	7	63	109	84	129	1353	961
% of Total MCR Days	38%	49%	53%	48%	47%	21%	17%	3%	28%	31%	27%	45%	36%	40%

Medicare Net Revenue

\$ 108,078 \$ 192,852 \$ 250,082 \$ 246,928 \$ 147,514 \$ 164,585 \$ 146,885 \$ 110,110 \$ 118,325 \$ 173,813 \$ 140,739 \$ 127,743 \$ 1,927,651 \$ 1,256,922

Summary Admission / Discharge List

Sullivan County Health Care (SC)

Page 1 of 1 08/14/2009 10:18 AM RI6300B

A/R Type	From/To	Admissions	Discharges
MCD	Expired Home Hospital <i>MCD Subtotal</i>	2 3 5	2 2 4 8
MRA	Home Hospital Nursing Home <i>MRA Subtotal</i>	2 3 ———————————————————————————————————	31
PVT	Expired Home Hospital <i>PVT Subtotal</i>	1 1	1 1 1 3
	Total	11	15

Note: This report includes only the selection criteria listed below. Effective Date From 7/1/2009 Thru 7/31/2009

Summary Admission / Discharge List Totals

Sullivan County Health Care (SC)

Page 1 of 1 08/14/2009 10:18 AM RI6300C

Total From/To	Admissions	Discharges
Expired		3
Home	4	6
Hospital	7	5
Nursing Home		1
Total	11	15

Page 45 of 45 8/14/09 10:22 AM AR6100B

Month-end Aged Analysis Sullivan County Health Care (SC) For the Month of Jul, 2009

Type Balance	Jul	Jun	May	Apr	Mar	Feb	Jan	Dec	Nov	Oct	Sep	Aug	Jul	Balance
	_			-										
Aged Analysis	s Summary													
HCB		•							160.32-		160.32	320.64-	2,443.52	2,122.88
INS	17,062.08	24,925.84	17,511.61	22,074.19	15,145.15	6,254.01	5,276.45	7,957.57	11,933.47	14,165.47	15,783.86	3,242.77	105,816.24	267,148.71
MCD	410,710.88	20,480,96	116,068.85	15,936.47	15,330.67	1,146.49	298,78-	1,774.86	5,338.26	558,34	5,633.75	5.018.39	54,607.83	652,306.97
MCP											•	•	,	002,000.01
MRA	89,254.11	27,499:47	25,492.89	11,023.54	9,487.56		5,488.33	512.00-	128.00-	384,00-	2,383.65	6,527.59	1,837.37-	174,295.87
MRB	40,231.67	9,013.86	740.69	1,024.94	6,728.68	4,773.48	10,980.96	4,336.31	4,300.56	5,404.60	16,481,43	11,058.87	142,978.57	258,054.62
MXA	894.07	11,105.29	14,284.50	6,675.00	1,143.50	3,932.56	393.14	2,504.00	2,560.00	1,273.14	7,116.42	4,677.02	41,015.87	97,574.51
MXB	6,394.35	2,584.91	104.77-	305.91	927.52	753.55-	972.24-	1,403.20-	879.02	1,291.96	2,544.02	1,103.76	20,576.18	33,373.87
PVT	14,861.00	25,755.00-	9,730.00-	11,104.71	760,00	819.02-	423.99	15.63	2,390,00	10,778.00	12,670.80	10,484,28	43,997.04	71,181.43
RES	3,679.66	13,497.51	6,023,86-	13,023.48	7,305.28	5,814.75	2,814,24	1,593,73-	17.61-	981.98	2,539.27	11,614.91-	16,972,48-	•
PHC					•	•		.,	1,151	301.00	2,008.21	11,014.81-	•	13,433.58
HST		754.11	728.50	27.26	757.28	713,37	81.78	206.90	726,40				375.00-	375.00-
								200.90	720.40					3,995.60
Totals:	583,087.82	84,106.95	158,968.41	81,195.60	57,585.64	21,062.09	24,187.87	13,286.34	27,821.78	34,069.49	65,313.52	30,177.13	392,250.40	1,573,113.04
	37.07%	5.35%	10.11%	5.16%	3.66%	1.34%	1.54%	0.84%	1.77%	2.17%	4.15%	1.92%	24.93%	100.00%

APPENDIX C

SULLIVAN COUNTY HEALTH CARE

5 Nursing Home Drive Unity, NH 03743 Telephone (603) 542-9511 Fax: (603) 542-9214

June 14, 2009

Robert K. Ehlers
Bureau Chief-Certification
Health Facilities Administration
State of New Hampshire
Dept. of Health and Human Services
129 Pleasant Street
Concord, NH 03301-3857

Dear Mr. Ehlers:

Enclosed is the Plan of Correction for the survey completed on June 25, 2009. Please consider this our written allegation of compliance.

Sincerely,

Ted J. Purdy

Administrator

Copy:

County Commissioners County Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/06/2009 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED	
		305093	B. WING		06/25/2009		
	PROVIDER OR SUPPLIER			TREET ADDRESS, CITY, STATE, ZIP CODE 5 NURSING HOME DRIVE UNITY, NH 03743	00/20		
(X4) ID PREFIX TAG	FIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL		ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPR DEFICIENCY)	SHOULD BE COMPLETION		
	INITIAL COMMENT A common list of alt DON: Director of N RN: Registered Nu 483.20(k)(3)(i) COM The services provid must meet professi This REQUIREMEN by: Based on medical r interviews it was de to have an interim of integrity for 1 of 24 sample. (Resident i Findings include: Standards According to Funda by Potter-Perry, Mo nursing care plan is also serves as a do client's nursing care care team. It is mad ready reference for According to Funda	obreviations follows: lursing/Nurses rse I/PREHENSIVE CARE PLANS led or arranged by the facility onal standards of quality. IT is not met as evidenced ecord review and staff termined that the facility failed eare plan for pain and skin residents in a standard survey	F 000	Preparation and/or execution of the Correction does not constitute admagreement by the provider of the trafacts alleged or conclusions set for statement of deficiencies. This Plant Correction is prepared based on the provisions of the Federal OBRA state regulations and State licensing and regulations. F 281 The care plan for resident #10 was updated on 6/24/09 to include interventions for pain. The "permanent" care plan for skin in had been completed on 5/26/09. New admissions and re-admissiform June 25 th to present will be audited for interim care plan completion. The interim care plan tool will be updated to include an area to adpain (if appropriate). The currer does address skin/wound issues Licensed nursing staff will be reducated on the completion of incare plans. New admissions and re-admissiform plants.	is Plan of ission or uth of the th in the e atutes! I dress it tool is.		
And the state of t	"The plan of care n reading the chart. T current and accurat a client's health car	eeds to be clear to anyone he record should be the most te source of information about e status."		will be audited for completion of interim care plans through Augu 2009. Results of the audit will be reviewed during the September meeting.	st 31, e		
	sheet and the histo hospital dated 5/17	cal record, including the face ry and physical from the /09, for Resident #10 reveals		Completion date: 7/31/09		(X6) DATE	
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE							

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

If continuation sheet Page 1 of 3

Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICARD SERVICES

PRINTED: 07/06/2009 FORM APPROVED OMB NO: 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING		(XS) DATE SURVEY COMPLETED		
305093		B. WING	·	06/25/2009			
NAME OF PROVIDER OR SUPPLIER SULLIVAN COUNTY HEALTH CARE			STREET ADDRÉSS, CITY, STATE, ZIP CODE 5 NURSING HOME DRIVE UNITY, NH 03743				
(X4) ID PREFIX TAG	ACACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SCIDENTIFYING INFORMATION)	ID PREFIX TÁĞ	PROVIDER'S PLAN OF COI (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)	I SHOULD BE	(X5) COMPLETION DATE	
F 281	this resident was a	dmitted to the facility on ses which include chronic ary disease, chronic low back	F 281		·		
· · · · · · · · · · · · · · · · · · ·	reveals the resident Pain Scale with the Vocalization (e.g., vas scored 1 (mild language (e.g., fidg body, withdrawn)" value of pressure outs perspiring, flushing (moderate pain) and skin tears, pressure previous injuries)" value of assessing nurse as	assessment dated 5/21/09 It was assessed with the Abbey following scores: "Q1 whimpering, groaning, crying)"), "Q3 Change in body leting, rocking, guarding part of was scored 1 (mild pain), "Q5 ge (e.g., temperature, pulse or side of normal limits, or pallor)" was scored 2 d "Q6 Physical changes (e.g., a areas, arthritis, contractures, was scored 3 (severe pain), pain checked off by the acute pain. The total score for ale was 7 of a possible 14.					
	Review of the Adm dated 5/21/09 reve Comments - scar le coccex small dime	ission Nursing Assessment als under "Skin Condition - eft hip, red irritated groin, sized area of scabs, callous (centimeter) x 1 cm."					
F 371	reveals no care pla was confirmed by S Stearns I) during an morning. It was als during an interview Further record revie receiving treatment 483.35(I) SANITAR	m care plan dated 5/21/09 n for pain or skin integrity. This staff B (RN/Unit Manager n interview on 6/24/09 in the o confirmed by Staff C (DON) on 6/25/09 in the morning. ew revealed Resident #10 was t for both skin and pain. ey CONDITIONS	F 37	1			
SS≒D	The facility must -						

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/06/2009 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA (DENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING		(X3) DATE SURVEY COMPLETED		
•		305093	B. WING		06/25	06/25/2009	
	(EACH DEFICIENC)	CARE TEMENT OF DEFICIENCIES YMUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	5	REET ADDRESS, CITY, STATE, ZIP CODE INURSING HOME DRIVE JNITY, NH 03743 PROVIDER'S PLAN OF CORRE (EACH CORRECTIVE ACTION SECROSS-REFERENCED TO THE AP DEFICIENCY)	ECTION IOULD BE	(XS), COMPLETION DATE	
F 371	considered satisfact authorities; and (2) Store, prepare, under sanitary conditions. This REQUIREMED by: Based on observation during a washed to maintain a washed to maintain findings include: Observation during on 6/23/09 with Storevealed that the fluoroler was porous surface. Surveyor was some type of constant A if the floor in Staff A replied that also used to be whose the conditions of the conditions.	om sources approved or story by Federal, State or local distribute and serve food dittions NT is not met as evidenced ion and interview the facility floor surface that could be a sanitary condition. The initial four of the kitchen of A (Director of Food Service) oor in the walk-in produce with discoloration in the floor questioned if the discoloration growth. Surveyor then asked used to have a covering on it, the floor used to be tiled and ere the freezer was. When cooler into the produce cooler,	F 371		ne walk- ill be cted, applied ors will by have entified ezer nths.		
		· .					



Nicholas A. Toumpas Commissioner

Mary P. Castelli Senior Division Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

OFFICE OF OPERATIONS SUPPORT

BUREAU OF LICENSING & CERTIFICATION

129 PLEASANT STREET, CONCORD, NH 03301-3857 603-271-4592 1-800-852-3345 Ext. 4592 FAX: 603-271-8716 TDD Access: 1-800-735-2964

August 3, 2009

Ted Purdy, Administrator Sullivan County Health Care 5 Nursing Home Drive Claremont, NH 03743

CCN 305093

Dear Mr. Purdy:

Based upon your off-site Health follow-up survey, which was completed on July 31, 2009, Sullivan County Health Care was found to be in substantial compliance with the requirements for Long Term Care facilities, effective July 31, 2009, for this survey only.

Sullivan County Health Care is in compliance with the requirements of 42 CFR Part 483, Sub-Part B, for Long Term Care facilities effective July 31, 2009.

We appreciate your continued cooperation and look forward to working with you.

Sincerely,

Robert K. Ehlers Bureau Chief-Certification Health Facilities Administration

RKE/ltd:LTC2

cc: CMS Regional Office State Medicaid Agency

SULLIVAN COUNTY HEALTH CARE

5 Nursing Home Drive Unity, NH 03743 Telephone (603) 542-9511 Fax: (603) 542-9214

July 14, 2009

Robert K. Ehlers
Bureau Chief-Certification
Health Facilities Administration
State of New Hampshire
Dept. of Health and Human Services
129 Pleasant Street
Concord, NH 03301-3857

Dear Mr. Ehlers:

Enclosed is the Plan of Correction for the Life Safety Recertification survey completed on June 24, 2009. Please consider this our written allegation of compliance.

Sincerely,

Ted J. Purdy Administrator

Copy:

County Commissioners County Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/01/2009 FORM APPROVED OMB NO. 0938-0391

	OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBÉR:	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01			(X3) DATE SURVEY COMPLETED	
,			-		•		
•		305093	B. WII	NG		06/2	24/2009
SULLIVA (X4) ID	ROVIDER OR SUPPLIER N COUNTY HEALTH SUMMARY STA	TEMENT OF DEFICIENCIES	ID	5 U	REET ADDRESS, CITY, STATE, ZIP CODE NURSING HOME DRIVE INITY, NH 03743 PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO	TION HID BE	(X5) COMPLETION
PRÉFIX TAG	(EACH DEFICIENC) REGULATORY OR L	MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREF TAG		CROSS-REFERENCED TO THE APPE DEFICIENCY)	ROPRIATE	DATE
K 062 SS=D	Required automatic continuously mainta condition and are in periodically. 19.7 25, 9.7.5 This STANDARD is Based on observation during 10:15 am and 11:5 Environmental Sen (Environmental Sen that of floor tub room pattern of sprinkler the upper mesh pattern of sprinkler the upper mesh pattern of sprinkler that installed items from activating. Findings include: Observation during approximately 10:15 am activating. Findings include: Observation during approximately 10:15 am activating.	rvices) revealed that plastic rs are installed in the first and s which obstruct the spray heads from passing through nels of the shower curtains in ion the facility failed to ensure do not prevent sprinkler heads tour with on 6/24/09 at 15 am with Staff B (Director of	K	062	K062 All shower rooms were assesse potential curtain liner obstruction sprinkler head spray patterns or 6/24/09. The plastic liners were removed from the first and third tub rooms on 6/24/09, eliminatin obstructions. Concealed sprinkler heads with away covers located in the tub roon all units were inspected the othe life safety inspection on 6/24. The one obstruction noted durin survey tour was corrected immed by moving the curtain rod back place and the rod was fastened place within the hour. All other rods were tested and found to be securely fastened. No other obstructions were found. Capitol Fire Protection Co, Inc where on 6/26/09. They replaced intermediate-rated sprinkler head located in the activity closet on the McConnell Unit with an ordinary sprinkler head. Capitol Fire also replaced the dry sprinkler pendathe kitchen cooler with a new or	ns to floor floor floor fall coms day of i/09 g the ediately into in curtain e vas I the ed the cont in	
LABORATOR	DED Y	DER/SUPPLIER REPRESENTATIVE'S SIG	NATURE		Administrator		7/14/09

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

Event ID: 6BLB21

Facility ID: 00088

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMEN	T OF DEFICIENCIES OF CORRECTION				(X3) DATE S COMPLE		
<i>/</i>		305093	B. WING		06/24/2009		
	/EACH DEFICIENC		5	NURSING HOME DRIVE INITY, NH 03743 PROVIDER'S PLAN OF CORE (EACH CORRECTIVE ACTION S CROSS-REFERENCED TO THE A	RECTION SHOULD BE	(XS) COMPLETION DATE	
K 062	Continued From p prevented from ac shower rod installe directly under the from falling away. 3-2.5.2, NFPA 13, SPRINKLER SYS The liquid in bulbicoded in accordar Table 3-2.5.1 Tem Classifications, and CLASSIFICATION GLASS BULB CO MAXIMUM CEILIN TEMPERATURE ISPRINKLER SYS Ordinary-temperatused throughout bused	age 1 divating properly due to a sed at the level of the drop ceiling cover, which prevents the cover. INSTALLATION OF TEMS by pe sprinklers shall be color ace with Table 3-2.5.1. Aperature Ratings, a Color Codings: I: Ordinary LOR: Orange or red and TEMPERATURE: 100 RATING: 135-170 I: Intermediate LOR: Yellow or green and TEMPERATURE: 150 RATING: 175-225 3, INSTALLATION OF TEMS ture-rated sprinklers shall be suildings. 3, INSTALLATION OF	K 062	K062 Sprinkler head observation vadded to the Environmental inspection list and results of inspection will be reported at safety committee meeting the month. Environmental Rounds will be conducted for 3 months to as compliance. Findings will be to the Safety Committee. Ide issues will be addressed. Completion Date: 7/24/09	Rounds the the e following e ssess reported		

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

	OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTI A. BUILDIN	PLE CONSTRUCTION G 01 - MAIN BUILDING 01	(X3) DATE SURVEY COMPLETED	
		305093	B. WING _		06/24/2009	
	ROVIDER OR SUPPLIER	CARE	5	REET ADDRESS, CITY, STATE, ZIP CO NURSING HOME DRIVE INITY, NH 03743	DE	
(X4) ID PREFIX TAG	IX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECT REGILL ATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCE		PROVIDER'S PLAN OF COR (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)	SHOULD BE	(X5) COMPLETION DATE	
K 062	classification. (2) Sprinklers locat one side or 30 in. (steam main, heating the intermediate-te (3) Sprinklers withing blowoff valve that contains the intermediate-te (4) Sprinklers under exposed to the direct the intermediate-te (5) Sprinklers in an approximate space, under an ununventilated attic sintermediate-tempe (6) Sprinklers in ununhaving high-powers celling shall be of the classification. (7) Sprinklers proteen equipment and ver high- or extra-high-	ed within 12 in. (305 mm) to 762 mm) above an uncovered ag coil, or radiator shall be of mperature classification. In 7 ft (2.1 m) of a low-pressure discharges free in a large room elemperature classification. It glass or plastic skylights ect rays of the sun shall be of mperature classification. In unventilated, concealed hinsulated roof, or in an	K 062			
	that the appropriate	ion the facility failed to ensure ely rated sprinkler heads are to location and nearby heat actors stipulated by NFPA.				
	Findings include:		٠			
	approximately 12:4 Environmental Ser (Environmental Se intermediate-rated the Activity Closet	tour on 6/24/09 at 5 pm with Staff B (Director of vices) and Staff C vices) revealed that an sprinkler head is installed in located on the MCU wing visible heat sources specified	·			Linear special state of the sta

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

	OF DEFICIENCIES F CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		ULTIPI LDING	LE CONSTRUCTION 01 - MAIN BUILDING 01	COMPLE	
		305093	B. Wit	4G		06/24	4/2009
•	ROVIDER OR SUPPLIER	CARE		51	ET ADDRESS, CITY, STATE, ZIP CODE NURSING HOME DRIVE NITY, NH 03743		
(X4) ID PREFIX TAG	/EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREF		PROVIDER'S PLAN OF CORRE (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APP DEFICIENCY)	OULD BE .	(X5) COMPLETION DATE
K 062	Continued From pa in NFPA 13.	ge 3	K	062			
	PROTECTION SYS Sprinklers shall be annually. Sprinklers foreign materials, p shall be installed in	inspected from the floor level shall be free of corrosion, aint, and physical damage and the proper orientation (e.g., r sidewall). Any sprinkler shall painted, corroded, damaged,					
K 130	that sprinkler head. Findings include: Observation during approximately 1:25 Environmental Ser (Environmental Ser bulb in the sprinkle Cooler in the Kitche upon which the spractivation.	pm with Staff B (Director of vices) and Staff C ryices) revealed that the glass r head located in the Produce en does not contain the fluid inkler head depends for	ĸ	130			
SS=D	This STANDARD 3-3.2.1.2(d)(2), NF FACILITIESThere shall be su	CIENCY NOT ON 2786 is not met as evidenced by: PA 99, HEALTH CARE ufficient receptacles located so ed for extension cords or			K130 4- Plex hospital grade outlet at have been purchased and receirom Grainger Industrial Suppl hospital grade outlet adapters installed in Rooms 126, 224, a	eived y. New will be	

STATEMEN	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTI A. BUILDIN	IPLE CONSTRUCTION IG 01 - MAIN BUILDING 01	(X3) DATE SURVEY COMPLETED	
		305093	B. WING _		06/24/2009	
	PROVIDER OR SUPPLIER AN COUNTY HEALTH	CARE	5	REET ADDRESS, CITY, STATE, ZIP CODE NURSING HOME DRIVE JNITY, NH 03743		
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPF DEFICIENCY)	ULD BE COMPLETION	
K 130	multiple outlet adapted and a seed on observation during 11:00 am and 12:00 Environmental Sen (Environmental Sen adapters are in use adapters are in use (a) The physical infibe confirmed by vis (b) The continuity connections in each electrical receptacle (c) Correct polarity connections in each electrical receptacles) shall be a seed on observation during 10:25 am and 12:00 Environmental Sen (Environmental Se	ion the facility failed to ensure that adapters are not used in tour on 6/24/09 between 0 pm with Staff B (Director of vices) and Staff C (prices) revealed that outlet in rooms 126, 224, and 236. HEALTH CARE FACILITIES in Patient Care Areas: regrity of each receptacle shall sual inspection. Of the grounding circuit in each in eshall be verified. Of the hot and neutral in electrical receptacle shall be corce of the grounding blade of reptacle (except locking-type in the facility failed to test entities are areas.	K 130	Facility outlets in Rooms 118, 1. 127, 226 and 332 with either broplastic molding or not have endretention force at the grounding will be replaced by the Master Electrician on staff at the facility. A comprehensive study of outle resident rooms will be conducted Outlets will be visually inspected broken plastic and retention force be tested using a Woodhead Receptacle Tension Tester. Idea issues will be addressed. Random tension testing will be conducted by maintenance staff sampling of outlets on a monthly and results will be recorded in a section of the Life Safety Inspection of 3 months. Identified issues waddressed. Completion Date: 7/24/09	oken ugh blade ts in ed. d for ce will entified f on a y basis ction ely a period	

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT	RS FOR MEDICARE OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTI	PLE CONSTRUCTION G 01 - MAIN BUILDING 01	(X3) DATE SI COMPLE	
		305093	B. WING_		06/24/2009	
	ROVIDER OR SUPPLIER	CARE	5	REET ADDRESS, CITY, STATE, ZIP COI NURSING HOME DRIVE INITY, NH 03743	DE	
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF COF (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)	SHOULD BE	(X5) COMPLETION DATE
	force at the ground oz. 2. Room 122, one molding. 3. Room 127, one force at the ground oz. 4. Room 226, one force at the ground oz. 5. Room 332, one		K 130			
Í						



Nicholas A. Toumpas Commissioner

Mary P. Castelli Senior Division Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES.

OFFICE OF OPERATIONS SUPPORT

BUREAU OF LICENSING & CERTIFICATION

129 PLEASANT STREET, CONCORD, NH 63361-3857 603-271-4592 1-800-852-3345 Ext. 4592 FAX: 603-271-8716 TDD Access: 1-800-735-2964

August 10, 2009

Ted Purdy, Administrator Sullivan County Health Care 5 Nursing Home Drive Claremont, New Hampshire 03743

CCN 305093

Dear Mr. Purdy:

Based upon your offsite Life Safety Recertification followup survey, which was completed on August 10, 2009, Sullivan County Health Care was found to be in substantial compliance with the requirements for Long Term Care facilities, effective July 24, 2009, for this survey.

Sullivan County Health Care is in compliance with the requirements of 42 CFR, Part 483, Sub-Part B for Long Term Care facilities effective July 31, 2009.

We appreciate your continued cooperation and look forward to working with you.

Sincerely,

Robert K. Ehlers

Bureau Chief-Certification

Health Facilities Administration

RKE/bsb:LTC4

cc: CMS Regional Office State Medicaid Agency



Nicholas A. Toumpas Commissioner

Mary P. Castelli Senior Division Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

OFFICE OF OPERATIONS SUPPORT

BUREAU OF LICENSING & CERTIFICATION

129 PLEASANT STREET, CONCORD, NH 03301-3857 603-271-4592 1-800-852-3345 Ext, 4592 FAX: 603-271-8716 TDD Access: 1-800-735-2964

August 10, 2009

Ted Purdy, Administrator Sullivan County Health Care 5 Nursing Home Drive Unity, New Hampshire 03743

CCN 305093

Dear Mr. Purdy:

On June 24, 2009 a Life Safety Recertification survey was conducted at your facility by the New Hampshire Office of Operations Support, Health Facilities Administration, to determine if your facility was in compliance with Federal requirements for nursing homes participating in the Medicare and/or Medicaid programs. This survey found deficiencies in your facility whereby corrections are required.

 Your Plan of Correction dated July 14, 2009, received on July 15, 2009, has been reviewed and accepted on July 20, 2009.

If you have any questions concerning this letter, please contact the undersigned at the Office of Operations Support, Health Facilities Administration, Brown Building, 129 Pleasant Street, Concord, New Hampshire 03301 (telephone: 271-3023).

Sincerely,

B. Christopher McDonald

Life Safety Code, Construction Coordinator

Health Facilities Administration

cfkh

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services JFK Federal Building, Room 2275 Boston, Massachusetts 02203



Northeast Consortium/Division of Surveys & Certification

August 4, 2009

Administrator Sullivan County Health Care 5 Nursing Home Drive Unity, NH 03743

Provider Number: 30-5093

Dear Administrator:

On July 29, 2009, a representative from the Centers for Medicare & Medicaid Services (CMS), Boston Regional Office, conducted a Life Safety Code Federal Monitoring survey at your facility.

Based upon the survey conducted by CMS, we find your facility to be in substantial compliance with the National Fire Protection Association 101 Life Safety Code, 2000 edition (existing) as referenced in 42 CFR 483 70 (a).

Thank you for your cooperation during our survey, and for your continued participation in the Medicare program.

If you have any questions regarding this correspondence, please contact John J. Clark, P.E. at (617) 565-1306.

Sincerely

William G. Dunham

Branch Chief

Survey Branch (SB)

cc: File

State Agency

Rlsjog

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 08/04/2009 FORM APPROVED OMB NO 0938-0391

	AVE & MEDICAID SEVAICES			<u>OMB NO. 0938-0391</u>
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	A. BUILDING	E CONSTRUCTION 01 - MAIN BUILDING 01	(X3) DATE SURVEY COMPLETED
	305093	B. WING		07/29/2009
NAME OF PROVIDER OR SUPPLI	TH CARE	5 N	ET ADDRESS, CITY, STATE, ZIP CODE URSING HOME DRIVE ITY, NH 03743	01/20/2003
PRÉFIX (EACH DEFICIE	STATEMENT OF DEFICIENCIES ENCY MUST BE PRECEDED BY FULL OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APP DEFICIENCY)	OULD BE COMPLETION
K 000 INITIAL COMM	ENTS	K 000		
was conducted Medicaid Servic July 29, 2009, fo	Federal Monitoring Survey (FMS) by the Centers for Medicare & es, Boston Regional Office, on ollowing a New Hampshire ic Health Services survey une 24, 2009.			:
Fire Protection A Safety Code, 20	surveyed pursuant to the National Association (NFPA) 101 Life 100 edition (for existing buildings), 1 Part 483.70 (a).			
	were noted during the survey, the stantial compliance with LSC 101.	·		
				;
				,
			·	;
	1			l
	,			
		,		
				i e e e e e e e e e e e e e e e e e e e
ı				1
				enger utt 175
				DIMPLEMAN
ABORATORY DIRECTOR'S OR PRO	DVIDER/SUPPLIER REPRESENTATIVE'S SIGNA	ATURE	TITLE	(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.



Nicholas A. Toumpas Commissioner

José Thier Montero Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301-6504 603-271-5194 1-800-852-3345 Ext. 5194 Fax: 603-271-7623 TDD Access: 1-800-735-2964

August 7, 2009

Dear Colleagues:

The Division of Public Health Services (DPHS), in coordination with Homeland Security and Emergency Management (HSEM) is pleased to make \$42,495 in additional funds available to your agency to support H1N1 planning activities in your region. You received initial notification of this award through an email from Mary Miller on July 27. I would like to take this opportunity to review key elements from that notification and provide an update on other activities that have occurred since the 27th.

These federal funds are being made available from supplemental appropriations provided by Congress to support federal, state, and local preparedness and response activities. All states have received funds under two program announcements issued by the U. S. Centers for Disease Control and Prevention's "Public Health Emergency Response" (PHER) program and the U. S. DHHS Assistant Secretary for Preparedness and Response (ASPR) Healthcare Preparedness Program's "Pandemic Influenza Healthcare Preparedness Improvements for States" initiative. The current award includes \$30,000 in PHER funds and \$12,495 in ASPR funds. There are several critical requirements that accompany these funds:

- These new funds must supplement, not supplant existing federal, state, and local funds.
- PHER and ASPR funds must be tracked and reported separately. The funds cannot be commingled with other sources of funding.
- Due to the evolving nature of vaccine development, the CDC PHER announcement has specific language requiring that "contracts should allow for termination for convenience and de-obligation of funds <u>remaining</u> if a decision is made not to conduct a full-scale vaccination campaign." Thus, any contracts that you enter into using these funds must include this stipulation.

Due to the urgent need to conduct these activities, Commissioner Toumpas' request to the Governor and Executive Council (G&C) for approval of the contract amendment with your agency will include that it be retroactive to September 9. 2009. This matches the date we anticipate approval for the federal funds to be added to the state budget. Thus, we ask that you to use this date for planning, budgeting, and implementation purposes, as any expenses incurred on or after that date will be allowable, pending G&C approval of the retroactive request.

We also want to make you aware that the CDC is currently working on releasing a second round of PHER planning funds to states and, thus, we anticipate making an additional award to your agency as well in the very near future. Please be assured that every federal and state partner involved in these awards is acutely aware of the significant administrative work that is involved in awarding and receiving these funds, especially during this time of increased planning activity. We, like CDC and ASPR, are doing everything possible to minimize the administrative requirements while also ensuring transparency and accountability while awarding funds as quickly as possible.

Finally, with respect to funding, Congress has also appropriated H1N1 "response" funds that will be made available were a mass vaccination campaign operationalized. These funds are anticipated to cover the actual operating costs, including personnel costs for administering vaccinations in mass clinic settings. We will keep you apprised of the status of these funds as more becomes known over the next several weeks.

In order to provide an opportunity to discuss these complex and urgent matters, we have scheduled a conference call for Wednesday, August 19 from 9:00 to 10:00 AM. Call-in information is attached. As part of the call, we will also be seeking your input on your priorities for how the second round of planning funds could best be used in your region

Thank you for your commitment and effort as we plan to respond to the ongoing H1N1 pandemic. We look forward to our continued partnership with your agency and all of our mutual planning partners.

Sincerely,

Neil Twitchell Administrator I Community Public Health Development Section

Enclosures: Exhibit A-1, Scope of Work

Workplan Template

Conference call information

Budget Form

New Hampshire Department of Health and Human Services Division of Public Health Services

COMPLETE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Greater Sullivan County PHN

New Hampshire Public Health Network Services

Budget Request for: Emergency Preparedness

(Name of RFP)

Budget Period: September 9, 2009 to June 30, 2010

		ER-STY 10	LEGISTA	ASPR STY '10.			
	1803233053	gram Funds	32.52	rogram Funds			
Line Item 2	gramman.n.n.n.	Requested	Hart Mary	Requested		Total 1200000	
1. Total Salary/Wages	\$	15,000.00	\$	-	\$	15,000.00	
2. Employee Benefits	\$	1,147.50	\$		\$	1,147.50	
3. Consultants	\$		\$		\$	-	
4. Equipment:	\$	1,265.00	\$	2,130.00	\$	3,395.00	
Rental	\$	<u>-</u>	\$	-	\$	_	
Repair and Maintenance	\$	-	\$	-	\$		
Purchase/Depreciation	\$		\$	-	\$		
5. Supplies:	\$	_	\$		\$	-	
Educational	\$	-	\$	1,270.00	\$	1,270.00	
ACC/POD	\$	_	\$	7,550.00	\$	7,550.00	
Office	\$	3,450.00	\$	-	\$	3,450.00	
6. Travel	\$	1,800.00	\$	· -	\$	1,800.00	
7. Occupancy	\$	-	\$		\$	-	
8. Current Expenses	\$		\$	-	\$	-	
Telephone	\$	500.00	\$	-	\$	500.00	
Postage	\$	-	\$	-	\$	-	
Printing	\$	_	\$	_	\$	-	
Audit and Legal	\$	-	\$	-	\$	-	
Insurance	\$	***	\$	-	\$	→	
Meetings	\$	-	\$	-	\$		
9. Software	\$	380.00	\$	300.00	\$	680.00	
10. Marketing/Communications	\$	2,860.00	\$	-	\$	2,860.00	
11. Staff Education and Training	\$	600.00	\$	-	\$	600.00	
12. Subcontracts/Agreements	\$	_	\$	_	\$	_	
13. Other (specific details mandatory):	\$	_	\$	**	\$		
Exercise/Drills	\$	-	\$	_	\$		
	\$	~	\$	-	\$	-	
	\$	-	\$		\$	-	
**************************************	\$	-	\$		\$	-	
	\$	-	\$		\$	-	
Sub-Total Direct Costs	\$	27,002.50	\$	11,250.00	\$	38,252.50	
14. Indirect Costs (not to exceed 10%)	\$	2,997.50	\$	1,245.00	\$	4,242.50	
TOTAL	\$	30,000.00	\$	12,495.00	\$	42,495.00	
1 0 1110	<u> </u>	20,000.00	<u> </u>	~=, i> 5:00	~	-2, ., 2.00	

DHHS Program/Section Manager Approval initials

APPENDIX E

DOC Jail Upgrade/Community Corrections Center Budget Update 8/20/09

the state of the s	DOC Facility Upgrades	Community Corrections Center
Project Budget	\$1,460,000.00	\$5,440,000.00
Project to date expenditures	(\$234,641.56)	(\$106,804.52)
Budget Remaining	\$1,225,358.44	\$5,333,195.48

Account Purchase Order History Report

Criteria: Account Mask=42.???????

Fiscal Year: 2008-2009

Account Num	P.O.	Name Of Vendor	PO Date	PO Status				
42.600.00123		CCC NEW CONSTRUCTION			Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETE	ED AMOUNT			0.00			
	1674	06/30/09 A/R: KNE CORP: DOC: REIMB IN	V#14978				(405.25)	
	1761	06/30/09 ACCRUED PAYABLE:ROCKINGH	IAM ELECTRIC				79.76	
	94065	W V ENGINEERING ASSOCIATES	05/12/09	Closed		11,519.50	11,519.50	0.00
	94163	BLODGETTS SASH & DOOR INC	05/20/09	Closed		661.16	661.16	0.00
	94310	RICHARD D. BARTLETT & ASSOC. LLC	06/02/09	Closed		7,345.00	7,345.00	0.00
	94360	SHEERR McCRYSTAL PALSON ARCH., INC.	06/03/09	Closed		25,588.40	25,588.40	0.00
	94582	HOME DEPOT U.S.A. INC.	06/16/09	Closed		248.54	248.54	0.00
	94669	MCMASTER-CARR SUPPLY CO	06/22/09	Closed		80.50	80.50	0.00
	94768	RALPH L OSGOOD INCORPORATE	06/29/09	Closed		133.24	133.24	0.00
	94790	RALPH L OSGOOD INCORPORATE	06/29/09	Closed		405.25	405.25	0.00
					Totals:	45,981.59	45,656.10	0.00
					Un-Expended Bal:	(45,656.10)	Budget Balance:	(45,656.10)
42.600.00124		DOC FACILITIES UPGRADES			Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETED AMOUNT				0.00	. '		
	93521	W V ENGINEERING ASSOCIATES	04/02/09	Closed		11,875.00	11,875.00	0.00
	93803	W V ENGINEERING ASSOCIATES	04/21/09	Closed		12,350.00	12,350.00	0.00
	94449	AIRGAS EAST INC	06/09/09	Closed	•	29.04	29.04	0.00
	94468	PINE HILL CONSTRUCTION	06/09/09	Closed		22,584.46	22,584.46	0.00
	94530	NORTH BRANCH CONSTRUCTION INC	06/12/09	Closed	•	17,191.94	17,191.94	0.00
	94582	HOME DEPOT U.S.A. INC.	06/16/09	Closed		183.69	183.69	0.00
					Totals:	64,214.13	64,214.13	0.00
					Un-Expended Bal:	(64,214.13)	Budget Balance:	(64,214.13)
42.600.00125		MISCELLANEOUS PROJECT EXPENS	E		Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETE	ED AMOUNT			0.00			
	1515	05/28/09 PO#93108 & PO#93406:CCC proj	ect adj to correct	acct.			550.85	
	94041	PLATINUM PLUS FOR BUSINESS	05/12/09	Closed		620.08	620.08	0.00
	94060	PLATINUM PLUS FOR BUSINESS	05/12/09	Closed		469.90	469.90	0.00
				•	Totals:	1,089.98	1,640.83	0.00
				·	Un-Expended Bal:	(1,640.83)	Budget Balance:	(1,640.83)

2.3.22

Account Purchase Order History Report

Criteria: Account Mask=42.???.????

Fiscal Year: 2008-2009

Account Num	P.O.	Name Of Vendor	PO Date	PO Status				
42.700.21096		BLDG.ADD & MAJOR RENOVA	TIONS		Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETE	ED AMOUNT			0.00			
•	58	07/11/08 Reverse Accrued Payable:	Pine Hill Construction	`			(2,500.00)	
	90102	PINE HILL CONSTRUCTION	07/11/08	Closed	•	2,500.00	2,500.00	0.00
					Totals:	2,500.00	0.00	0.00
					Un-Expended Bal:	0.00	Budget Balance:	0.00

End of Report

Account Purchase Order History Report

Criteria: Account Mask=42.???.????

Fiscal Year: 2009-2010

Account Num	P.O.	Name Of Vendor	PO Date	PO Status				
42.600.00123		CCC NEW CONSTRUCTION			Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETE	ED AMOUNT			0.00			
	4	07/01/09 DEPOSIT AT LSB: 7/1/09 #178					(405.25)	
	8	07/01/09 DEPOSIT#4 ENTERED AS REV A	ND S/B A/R NUN	IBER. OK TO AD	DJUST		405.25	
	126	07/27/09 #1761:ROCKINGHAM ELECTRIC.:	ACC.PAYABLE	REVERSAL			(79.76)	
	10022	SHEERR McCRYSTAL PALSON ARCH., INC.	07/07/09	Closed		40,274.50	40,274.50	0.00
	10025	GEOTECHNICAL SERVICE, INC.	07/07/09	Closed	*	5,900.00	5,900.00	0.00
•	10044	ROCKINGHAM ELECTRIC SUPPLY COMPANY	07/07/09	Closed		191.76	191.76	0.00
	10398	SHEERR McCRYSTAL PALSON ARCH., INC.	08/04/09	Closed		33,132.30	33,132.30	0.00
					Totals:	79,498.56	79,418.80	0.00
					Un-Expended Bal:	(79,418.80)	Budget Balance:	(79,418.80)
42.600.00124		DOC FACILITIES UPGRADES			Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETE	ED AMOUNT			0.00			
	144	07/28/09 DEPOSIT AT LSB: 7/28/09 #188					(80.00)	
	10021	NORTH BRANCH CONSTRUCTION INC	07/07/09	Closed		34,947.78	34,947.78	0.00
	10083	W V ENGINEERING ASSOCIATES	07/08/09	Closed		2,676.22	2,676.22	0.00
	10179	MCMASTER-CARR SUPPLY CO	07/15/09	Closed		324.29	324.29	0.00
	10325	FENCES UNLIMITED INC	07/27/09	Closed		4,500.00	4,500.00	0.00
	10349	PINE HILL CONSTRUCTION	07/29/09	Closed		58,050.00	58,050.00	0.00
	10353	NORTH BRANCH CONSTRUCTION INC	07/29/09	Closed		16,700.83	16,700.83	0.00
	10354	KPMB ENTERPRISES LLC	07/29/09	Closed		22,439.25	22,439.25	0.00
	10380	ROCKINGHAM ELECTRIC SUPPLY COMPANY	08/03/09	Closed		66.03	66.03	0.00
	10399	ALL SEASONS CONSTRUCTION CORP	08/04/09	Closed		2,362.40	2,362.40	0.00
		•			Totals:	142,066.80	141,986.80	0.00
					Un-Expended Bal:	(141,986.80)	Budget Balance:	(141,986.80)
42.600.00125		MISCELLANEOUS PROJECT EXPENSE		:	Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETE	D AMOUNT			0.00			
	10178	WW GRAINGER	07/15/09	Closed		30.72	30.72	0.00
					Totals:	30.72	30.72	0.00
					Un-Expended Bal:	(30.72)	Budget Balance:	(30.72)

Account Purchase Order History Report

Fiscal Year: 2009-2010

Account Num	P.O.	Name Of Vendor	PO Date	PO Status				
42.600.18001		CCC/JAIL UPGRADE EXPENSES			Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETED AMOUNT							
	10537	FAIRPOINT COMMUNICATIONS INC	08/13/09	Closed		225.00	225.00	0.00
	10577	HOME DEPOT U.S.A. INC.	08/18/09	Closed		769.04	769.04	0.00
	10613	EDWARD H LESKIEWICZ	08/19/09	Closed		400.00	400.00	0.00
	10627	W V ENGINEERING ASSOCIATES	08/19/09	Closed		1,900.00	1,900.00	0.00
	10628	M & W SOILS INGINEERING INC	08/19/09	Closed		1,118.65	1,118.65	0.00
	10629	GREG CHANIS	08/20/09	Open		14.85	0.00	14.85
		•			Totals:	4,427.54	4,412.69	14.85
				· ·	Un-Expended Bal:	6,895,587.31	Budget Balance:	6,895,572.46
42.600.18002		CCC/JAIL UPGRADES PHASE 2			Budgeted	P.O. Amt	Expenditures	Encumbrance
	BUDGETED AMOUNT				0.00			
	10430	VALLEY NEWS	08/05/09	Closed		618.72	618.72	0.00
	10467	THE KEENE SENTINEL	08/07/09	Closed		526.32	526.32	0.00
	10468	UNION LEADER CORPORATION	08/07/09	Closed		572.52	572.52	0.00
					Totals:	1,717.56	1,717.56	0.00
					Un-Expended Bal:	(1,717.56)	Budget Balance:	(1,717.56)

End of Report

Criteria: Account Mask=42.???????



REQUEST FOR TRANSFER OF FUNDS

Account description	Account Number	Transfer From (Credit)	Transfer To (Debit)	Purpose of Transfer		
NHAC Conference Prep	10.400.15050	\$2,620.00				
Comm's Office Legal Services	10.400.12020		\$2,620.00	NII Dation and New Date & Amelica & A.		
				NH Retirement New Rate Applied / Appeale by Counties, litigation cost p/county; County		
				does not need the full \$7,500 NHAC		
				Conference Prep budget as NHAC has fun- to cover some cost		
Dept. Head / Date	_			County Administrator / Date (when applicable)		

APPEN'IX G

NEW HAMPSHIRE BUSINESS FINANCE AUTHORITY DESIGNATED RECOVERY ZONES

Sources:

- NH Economic Revitalization Zone List (7/10/09)
- NMTC Eligible Census Tracts
- Neighborhood Stabilization Program Tier 1 Communities
- Base Closure List

Belknap County

Census Tracts 9659 and 9660: City of Laconia (part)

State Route 11-A at 3-6 Sawmill Road, Gilford (part)

Carroll County

Census Tracts 9553 and 9554: towns of Chatham and Conway

Census Tract 9556: towns of Sandwich, Tamworth, and Albany

Census Tracts 9558 and 9559: towns of Ossipee, Freedom, and Effingham

Chesire County

Census Tracts 9713 and 9714.01: City of Keene (part)

Black Brook North and Corporate Parks, Keene

Census Tracts 9716 and 9717: towns of Hinsdale and Winchester

Drumlin and Stone Arch Bridge Industrial Parks and Millpore, Jaffrey (part)

Coos County

Census Tracts 9506, 9507 and 9508: City of Berlin

City of Nashua

City of Manchester

Census Tract 255: towns of Hillsborough and Windsor

Clement Road and Sagamore Industrial Park, Hudson (part)

Route 202 N/S Business Districts, Peterborough (part)

Merrimack County

Census Tracts 322 and 329: City of Concord (part)

Census Tract 350: Town of Pittsfield

Census Tract 380: Town of Boscawen

Census Tracts 430.01 and 430.02: City of Franklin

Rockingham County

Census Tract 675.02: Town of Newmarket (part)

Census Tract 630: Town of Seabrook

Census Tract 550.02: Town of Raymond (part)

Census Tract 694: City of Portsmouth (part)

Pease Tradeport, Portsmouth, and Newington

Town of Derry

Census Tract 1003.02: Town of Salem (part)

Strafford County

Census Tracts 802.01 and 802.02: Town of Durham (part)

Census Tract 870: Town of Farmington

Census Tract 880: Town of Milton

Census Tracts 830.01 and 830.02: City of Somersworth

City of Rochester

Census Tract 815: City of Dover (part)

Sullivan County

Census Tract 9754: Town of Newport

Census Tract 9756: Towns of Langdon and Unity

Census Tract 9757: Towns of Charlestown and Acworth

Census Tracts 9759.01 and 9759.02: Claremont (part)

Syd Clarke, Ashley Landing and Riverbend Industrial Parks, River Road TIF District, Claremont

August ___, 2009

Jack Donovan
Executive Director
NH Business Finance Authority
2 Pillsbury Street, Suite 201
Concord, NH 03301

Dear Mr. Donovan:

The American Recovery and Reinvestment Act of 2009 amended the Internal Revenue Service Code, authorizing State and local governments to issue Recovery Zone Facility Bonds. Recovery Zone Facility Bonds may be used to finance certain qualified business property within designated recovery zones. The New Hampshire volume cap for Recovery Zone Facilities Bonds is allocated among the counties and the City of Manchester based upon relative employment declines in 2008.

County cannot use this Recovery Zone Facilities Bond allocation because it is not authorized to issue bonds for private businesses. In accordance with Section 1400U-1(a)(3)(A) of the Act, I am writing to waive the County's Recovery Zone Facilities Bond volume cap allocation. I understand that the waived bond cap will be reallocated by the State as it shall determine in good faith in its discretion. Eligible projects located in counties that have waived their allocation will be given priority for reallocation of the volume cap.

Sincerely,

County Administrator

payments within 45 days of the date that Form 8038-CP is filed with the internal Revenue Service.

Treasury has solicited comments on improving the pracedures for capturing the cash subsidy of Direct Payment BABS, and issuers can anticipate that further quidance will be released on this subject. Treasury also released Form 8038-CP, along with instructions on completing it, with this notice.

Issues of AABs musicalso comply with existing informational reporting requirements, including summission of IRS Form 8038 G. Information Neturn for Tax-exempt Governmental Obligations, on or before the 15th day of the 2nd calendar month after the close of the calendar quarter in which the issue was issued.

The notice also provides that the election to designate bonds as BABs must be made on the issuer's books and records on or before the issue date of the bonds.

Recovery Zone Economic Development Bonds and Recovery Zone Facility Bonds

The ARRTA authorizes State and local governments to issue Recovery Zone Bonds in 2009 and 2010 in the form of RZEDBs and Recovery Zone Facility Bonds ("RZFBs"), and imposes a national bond volume limitation of \$10 billion with respect to RZEDBs and \$15 billion with respect to RZFBs. Notice 2009-50 provides guidance on the maximum face amount of RZEDBs and RZFBs that may be issued within each State and, specifically, within counties and large municipalities in each State. The ARRTA requires each State to suballocate volume cap among counties and large municipalities based on relative unemployment decline. In order to ease the administrative burden on States of calculating this required suballocation, the IRS has performed the calculation in connection with the release of Notice 2009-50, and has posted the results on the IRS website (http://www.irs.gov/taxexemptbond/index.html). Under the ARRTA and this notice, counties and large municipalities may waive their respective suballocations for reallocation by the State to eligible projects or programs elsewhere within the State. The notice also provides interim guidance on various

Eligible issuers of Recovery Zone Bonds include States, political subdivisions, and entities empowered to issue bonds on behalf of States and political subdivisions. Issuers may designate bonds as RZEDBs or RZFBs (assuming the requirements for each type of bond are met) up to the amount of volume cap allocated to that issuer. Alternatively, an issuer may allocate its volume cap to another eligible issuer to issue such bonds. This allocation can be made in any reasonable manner as may be determined in good faith by the issuer for use for eligible costs for an economic development project. However, the property or purpose to which the proceeds of the bonds relate must be in the jurisdiction of both the issuer and the entity to which volume cap was allocated.

aspects of issuing Recovery Zone Bonds,

RZEDBs are an "enhanced" type of Direct Payment BABs with respect to which the governmental issuer receives cash subsidy payments from Treasury equal to 45% (rather than 35%) of the interest payable thereon. Accordingly, the principles applicable to Direct Payment BABs, including those in Notice 2009-26 (discussed in the Build America Bonds section above), also apply to RZEDBs. Proceeds of the RZEDBs, other than up to 2% used to pay issuance costs and amounts held in a reasonably required reserve, must be used to finance qualified economic development purposes including (1) capital expenditures paid or incurred with respect to property located in a recovery zone, expenditures for public infrastructure and construction of public facilities and (3) expenditures for job training and educational programs.

RZFBs are a new category of "exempt facility bonds" under Section 142 of the Internal Revenue Code and, as such, are tax-exempt private activity bonds. At least 95% of the proceeds of RZFBs, less amounts held in a reasonably required reserve, must be used for recovery zone property in the active conduct of a qualified business. Recovery zone property is defined as depreciable property which was constructed, reconstructed, renovated or acquired by purchase by the taxpayer after the date on which the recovery zone designation took effect.

As required by the ARRTA, proceeds of Recovery Zone Bonds must be used to fund projects and

http://www.eapdlaw.com/newsstand/detail.aspx?news=1645

wards Angell Palmer & Dodge - Newsstand

programs related to designated "recovery zones." The notice provides that the designation of an area as a "recovery zone" may be made by an issuer in any reasonable manner as it shall determine in good faith.

Qualified School Construction Bonds

The ABRTA authorizes the issuance of \$1/1 billion of Qualified School Construction Bonds ("QSCBs") in 2009 and \$11 billion of QSCBs in 2010 Notice 2009-35 sets forth the maximum amount of the \$11 billion of QSCBs that may be issued by each State and local educational agency for 2009 and provides interim guidance with respect to the issuance of QSCBs, including the maximum maturity and credit rate, sinking fund yield calculation, information reporting, eligible expenditures, and eligible issuers.

Eligible issuers of QSCBs include States, political subdivisions, large local educational agencies that are State or local government entities and entities empowered to issue bonds on behalf of any such entity. An eligible issuer may reallocate QSCB volume cap by transferring it to other issuers in a manner similar to that described in the Recovery Zone Economic Development Bonds section of this advisory.

An issuer of QSCBs must use 200% of available project proceeds of the issue for eligible costs, which include construction, rehabilitation or repair of a public school facility or the acquisition of land on which such facility is to be constructed, with a portion of the proceeds of the QSCBs. For this purpose, the costs of acquisition of equipment to be used in the construction, rehabilitation or repair of public school facilities is included as "eligible proceeds."

The maximum maturity and credit rate for QSCBs are determined as of the date there is a binding contract to purchase the bonds. These maturities and rates can be found daily on the Bureau of Public Debt website (www.treasurydirect.gov/gov/apps/slgs/slgs_irstax.htm). Further, an issuer may invest a related sinking fund at 110 percent of the long-term adjusted applicable federal rate, compounded semiannually, for the month in which the QSCB is sold. These rates are also published on the Bureau of Public Debt website.

Qualified Zone Academy Bonds

The ARRTA increases the national bond volume cap for Qualified Zone Academy Bonds ("QZABs") to \$1.4 billion for each of calendar years 2009 and 2010. Notice 2009 30 sets forth the maximum amount of the \$1.4 billion of QZAB volume that may be issued for each State for each of the calenda years 2008 and 2009. In addition, the notice provides interim guidance with respect to the maximum maturity and credit rate for QZABS and permitted sinking fund yield related to proceeds of QZABs, each of which are generally established in the same manner as described in the Qualified School Construction Bonds section of this advisory.

New Clean Renewable Energy Bonds

The ARRTA increases the national bond volume cap for New Clean Renewable Energy Bonds ("New CREBs") by \$1.6 billion to a total of \$2.4 billion. Notice 2009-33 solicity applications for allocations of the national New CREBs volume cap. The notice also provides guidance on the eligibility requirements for projects, the application requirements, the allocation methodology of the IRS and Treasury, and cortain other interim guidance. Qualified issuers must submit a volume cap application (a copy of which is attached to Notice 2009-33) by August 4, 2009.

Qualified issuers of New CREBs include governmental bodies, cooperative electric companies, and public power providers, as well as New CREBs lenders (cooperative companies which are owned by, or have outstanding loans to at least 100 cooperative electric companies) and not-for profit electric utility companies that have received a loan or loan guarantee under the Rural Electrification Act. The total volume cap will be allocated, up to one-third each to qualified projects owned by governmental bodies, cooperative electric companies, and public power providers. Allocations of New CREBs volume

http://www.eapdlaw.com/newsstand/detail.aspx?news=1645

13 ATAM

Recovery Zone Economic Development Recovery Zone Facility

Area	Residual	Bond	Bond
New Hampshire	v	90,000,000	135,000,000
Manchester city, NH		5,977,000	8,966,000
Belknap County, NH		1,959,000	2,939,000
Carroll County, NH		249,000	374,000
Cheshire County, NH		7,762,000	11,643,000
Coos County, NH		3,205,000	4,807,000
Grafton County, NH		5,023,000	7,534,000
Hillsborough County, NH	Residual	24,059,000	36,088,000
Merrimack County, NH		2,997,000	4,495,000
Rockingham County, NH		25,370,000	. 38,055,000
Strafford County, NH		10,070,000	15,105,000
Sullivan County, NH		3,329,000	4,994,000

ECONOMIC REVITALIZATION NEW HAMPSHIRE



